

POSITION	INITIALS	ID NO.	DATE
	<i>h G</i>		<i>8/17/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>10</i>	<i>8-21-00</i>
FORMALITY REVIEW	<i>C. J. C.</i>	<i>50530</i>	<i>9-28-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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